U.S. Department of Labor Employment Standards Administration Office of Labor-Management Standards Washington, DC 20210

FORM LM-3 LABOR ORGANIZATION ANNUAL REPORT

Form Approved Office of Management and Budget No. 1215-0188 Expires 07-31-2004

FOR USE BY LABOR ORGANIZATIONS WITH LESS THAN \$200,000 IN TOTAL ANNUAL RECEIPTS

	comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.						
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.							
For Official Use Only FILE NUMBER 2. PERIOD	D COVERED 3. (a) AMENDED — If this is an amended report correcting a previously filed report, check here:						
(APR-1 100 \$0 4-003 From	0 1 0 1 2 0 0 2 (b) TERMINAL — If your organization ceased to exist and this is its terminal report, see Section XII of the instructions and check here:						
Through	h 12312002 (c) SUBSIDIARY — If this is a report for a subsidiary organization of your union as defined in Section X of the instructions, check here:						
	8. MAILING ADDRESS (Type or print in capital letters.)						
	First Name						
PAMELA JEFFERSON (3) 504-003	WESLEY						
ENGINEERS, PROF & TECH, AFL~CIO 430 LU 27	•						
P O BOX 9012	Last Name						
	DARBRO						
HUMTSVILLE, AL 35812 12/2002	P.O. Box • Building and Room Number (if any)						
leftekkleleferettekkledt!!	PO BOX 9012						
	Number and Street						
A FEW LIZION OR ORGANIZATION NAME	- Humbor and officer						
4. AFFILIATION OR ORGANIZATION NAME ENGINEERS, PROF+TECH, AFL-C10							
5. DESIGNATION (Local, Lodge, etc.) 6. DESIGNATION NUMBER	R City						
Lu 27	HUNTSVILLE						
7 UNIT NAME (If any) MARS#ALL ENGINEER+SCIENTIST ASS'N	State ZIP Code + 4						
9. Are your organization's records kept at its mailing address? (If "No," provide address in Item 56.) Yes X No	AL 35812-						
56. ADDITIONAL INFORMATION (If more space is needed, attach additional pages p	properly identified.)						
Item Number							
Each of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VI on penalties in the instructions.)							
57. SIGNED: Wesley Partro PRESIDENT 58. SIGNED: Clara & Wesley TREASURER							
	other title, e instructions.) 3 / 27 / 03 (256) 544 - 3616 see instructions.)						
Date Telephone Number	Date Telephone Number						

 During the Reporting Period Did Your Organization: 10. Have a "subsidiary organization" as defined in Section X of the instructions? 11. Create or participate in the administration of a trust or other fund or organization, as defined in the instructions, which provides benefits for members or their beneficiaries? 	Yes No.	20	 How many members d organization have at th reporting period? What is the maximum recoverable under your fidelity bond for a loss any officer or employed organization? 	amount r organization's caused by	171 7500
12. Have a political action committee (PAC) fund?	X	21.	During the reporting per- organization have any constitution and bylaws	changes in its s (other than	Yes No
Acquire or dispose of any goods or property in any manner other than by purchase or sale?	Х		•) or in practices/ e instructions? bylaws have changed,	~
Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative?	X		attach two new dated o		•
15. Discover any loss or shortage of funds or other property?	X	,	. What is the date of you next regular election of	officers?	MO YEAR 03 2004
(Answer "Yes" even if there has been repayment or recovery.)		23.	 What are your organize dues and fees? (Enter a minimum and 		
16. Have any officer who was paid \$10,000 or more by your organization and also received \$10,000 or more as an officer or employee of another labor			than one rate applies for		
organization or of an employee benefit plan?	×		-	Rates of Dues	and Fees
17. Pay any employee salary, allowances, and other expenses which, together with any payments from affiliates, totaled more than \$10,000?	X		(a) Regular Dues/Fees	\$ /30 per_	YEAR (Month, Year, etc.)
18. Have loans totaling more than \$250 to any officer,		Ì	(b) Initiation Fees	\$	
employee, or member, or make any loans to a business enterprise?	X		(c) Transfer Fees	\$	
(If the answer to any of the above questions is "Yes," provide of in Item 56 on page 1 as explained in the instructions for each	details		(d) Work Permits	\$ per	YEAR (Month, Year, etc.)

24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Enter Amounts in Dollars Only -- Do Not Enter Cents

FILE NUMBER: 504 - 003

	d office during the reporting period e or other disbursements. Use all capit	al letters.)	Gross Salary (before taxes and	Allowances and Other	Tatal
<u> </u>	as PRESIDENT or TREASURER.)	Status (C)*	other deductions) (D)	Disbursements (E)	Total (F)
1. DARBRO	First Name WESL	EY		855	8 <i>55</i>
THOPRESIDENT	Γ .	Status C			
2. STINSON	First Name HELE	E N			D
THOVICE PRES	SIDENT	Status C			
3. JEFFERSON	First Name PAME	ELH			D
THOTREASURE	٩	Status			
4. WELCH	First Name	2 A			805
THETREASUREK	2	Status C			
Last Name 5. WATTS	First Name G-A 1 /	/ES			0
THOSECRETAR)	y	Status			
Last Name 6.	First Name				
Titte		Status			
Last Name 7.	First Name				
Title		Status			
8. Totals from additional pages	(if any)		-		
9. Totals of Lines 1 through 8					
				10. Less Deductions	
Enter the Total from Line 11 in	n		Item 45 ➪	11. Net Disbursements	1760
*Code for Status (C): past officer — P	continuing officer — C; new officer	during the repo	rting period — N. your d	officer was not elected at a regularization's constitution and bylaw.	

FILE NUMBER: 504-003.

	Iten	ASSETS	Start of Reporting Period (A)	End of Reporting Period (B)	Item	LIABILITIES	Start of Reporting Period (C)	End of Reporting Period (D)
ES	25.	Cash	7949	6606	32.	Accounts Payable	0	0
TEMENT A AND LIABILITIES	26.	Loans Receivable	0	0	33.	Loans Payable	0	0
STATEMENT TS AND LIAE	27.	U.S. Treasury Securities	O	D	34.	Mortgages Payable	D	0
	28.	Investments	37036	38647	35.	Other Liabilities	0	0
STJ SETS	29.	Fixed Assets	0	Þ	36.	TOTAL LIABILITIES	O .	D
ASS	30.	Other Assets	0	0	:			
	31.	TOTAL ASSETS	44985	4 5 253	37.	NET ASSETS (Item 31 less Item 36)	44985	45253
	CASH RECEIPTS			AMOUNT	CASH DISBUR		SEMENTS	AMOUNT
NTS	38.	Dues		22250	45.	To Officers (from Item 24))	1661
	39.	39. Per Capita Tax		0	46. To Employees (less deductions)		8527	
TATEMENT B AND DISBURSEMENTS	40.	40. Fees, Fines, Assessments & Work Permits 41. Interest & Dividends		0	47.	Per Capita Tax	10354	
T B	41.			1644	48. Office & Administrative Expense			1033
TATEMENT AND DISBU	42.			0	49.	49. Professional Fees		6
AND	43. Other Receipts			15	50. Benefits			0.
S	44.	TOTAL RECEIPTS		23909	51.	Contributions, Gifts & Gra	ınts	\mathcal{D}
RECEIPT	CEIR				52.	Purchase of Investments	& Fixed Assets	0
=	If total receipts reported in Item 44 are \$200,000 or more, your organization must file Form LM-2				53.	Loans Made		0
	instead of this form.			54. Other Disbursements			2065	
					55.	TOTAL DISBURSEMENT	S	23640